U.S. DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD CG-6091 Rev. (06-06)

Unaccompanied Personnel Housing Inspection Form

Occupant Name and Rank:		
Unit:	Bldg:	Room Number:

Unit:		Bidg:		Room number:		
	dition of each item appropriate block	Satisfactory at Inspection	Occupant Clean/Repair	Repair. Standard Wear and Tear. Not Reimbursable	Repair Reimbursable	Accepted at Re-inspection
<u>Items</u>		Sat	Occ	Rep Sta We Tea Rei	Reg	Acc Re-
Floors						
Walls						
Ceiling						
Doors						
Windows						
Blinds/Shades						
Light Fixture						
Light Switch						
Electrical Outlets						
Closet						
Closet Door						
Lavatory & Cabinet						
Towel Bars						
Medicine Cabinet						
Soap Dish						
Toilet						
Paper Holder						
Bathtub						
Toothbrush Holder						
Bathtub Enclosure						
Shower Stall						
Valves & Head						
Shower Towel Bar						
Shower Soap Dish						
Shower Door						
Comments:						
Date:	Signature of Occupant:		Signature	of Inspector:		

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Unaccompanied Personnel Housing Inspection Form (continued)								
Include any additional items not listed on page 1.	Satisfactory at Inspection	Occupant Clean /Repair	Repair. Standard wear and tear. Not Reimbursable	Repair Reimbursable	Accepted at Re- inspection			
Comments:								